

ISP CASE#

ILLINOIS STATE POLICE
DIVISION OF FORENSIC SERVICES*FORENSIC SCIENCES COMMAND*FSC-C
EVIDENCE SUBMISSION FORM FOR CHICAGO POLICE DEPARTMENT

TODAY'S DATE 30 Oct 2013PAGE 1 OF 2

RD#:	CR 1051475	OFFENSE: Forgery DATE OF OFFENSE: 10/02/09	SUBMITTING/CONTACT DET.: Detective Shawn Kennedy #21270
#1 Victim	Name [REDACTED]	IR/SID/FBI #'S: IR # [REDACTED]	DET'S WORK HOURS: Monday-Friday 0900-1700 hours
#2 Suspect	Sgt. Jose L. Lopez	No Record	PAGER/CELL PHONE NUMBER: 312-351-0441
#3 Suspect	PO Darryl Hardy	No Record	BELL & PAX NUMBER: Bell 312-746-4170 Pax 4057
#4 Suspect	PO Pablo Mariano	No Record	AREA/UNIT: Bureau of Internal Affairs/121
#5 Suspect	Det. Anthony M. Amato	No Record	EVIDENCE COORDINATOR (EC): <i>[Signature]</i>
#6 Suspect	PO Victor Rivera	No Record	EC REVIEW DATE: <i>31 Mar 2013</i>

INSTRUCTIONS:***PLEASE LIST ALL INVENTORIES ASSOCIATED WITH THE ABOVE RD# SEPARATELY*********ATTACH ORIGINAL CASE REPORT********SUBMIT FORM TO AREA EVIDENCE COORDINATOR FOR REVIEW****

INVENTORY	ITEM DESCRIPTION	SPECIFIC REQUEST FOR ANALYSIS <i>Indicate to Which Section(s) Each Item Should Go</i>	PRIORITY *EC-ONLY*	BOX TYPE *FSS-ONLY*
13035975	20 Original Consent to Search Forms (Sgt. Jose Lopez)	D	/	
13035992	Handwriting Samples (Sgt. Jose Lopez)	D	/	
13036007	20 Original Consent to Search Forms (PO Darryl Hardy)	D	/	
13036012	Handwriting Samples (PO Darryl Hardy)	K2-L1-35 D	/	F Box
13036019	20 Original Consent to Search Forms (PO Pablo Mariano)	D	/	
13036021	Handwriting Samples (PO Pablo Mariano)	D	/	
13036029	20 Original Consent to Search Forms (Det. Anthony Amato)	D	/	
13036039	Handwriting Samples (Det. Anthony Amato)	D	/	
13036043	20 Original Consent to Search Forms (PO Victor Rivera)	D	/	

PLEASE INCLUDE PERTINENT CASE INFO AND LIST ANY ASSOCIATED RD#S IN WHICH COMPARISONS ARE NEEDED:

The inventories listed on this page and the attached page are the handwriting samples requested by the Illinois State Police (Lyndel Morris) for handwriting analysis by the Springfield Forensic Science Laboratory. History: The suspect **[REDACTED]**, who is listed in the original case under RD number **[REDACTED]** was shown not to be associated with the signature in question, from the original Consent to Search form (which is still in the possession of ISP). This was the finding of an independent expert, as well as the ISP under lab case number **[REDACTED]**. Through a Grand Jury subpoena, writing samples have been obtained from the five involved sworn CPD members for examination and comparison.

*IF MORE SPACE IS NEEDED PLEASE USE AND ATTACH AN ADDITIONAL FORM

Attachment# **78**

ISP 6-634 (06/05)

Page **1** of **2****CR 1051475**

CPD 0028050

ISP CASE#

**DIVISION OF FORENSIC SERVICES*FORENSIC SCIENCES COMMAND*FSC-C
EVIDENCE SUBMISSION FORM FOR CHICAGO POLICE DEPARTMENT**

TODAY'S DATE 30 Oct 2013

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RD#:	CR 1051475	OFFENSE: Forgery	SUBMITTING/CONTACT DET.:
		DATE OF OFFENSE: 10/02/09	Detective Shawn Kennedy #21270

****PLEASE LIST ALL ADDITIONAL INVENTORIES ASSOCIATED WITH THE ABOVE RD# SEPARATELY****

1051475

Attachment #18 ISP 6-634 Additional Inventory Page (06/05)

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CR 1051475

Officer Darryl L. Hardy
Star Number: 16834

Officer 1051475

Attachment # 38

Page 4 of 21

**SWORN FIRST AMENDMENT JUDGEMENT AFFIDAVIT
CHICAGO POLICE DEPARTMENT/PERSONNEL DIVISION**

TO: **COMMANDER OF POLICE PERSONNEL**

FROM: NAME: DARRYL HARDY

TITLE: Probationary Police Officer

SOCIAL SECURITY NO. [REDACTED]

SUBJECT: RECEIPT OF FIRST AMENDMENT JUDGEMENT

I HEREBY ACKNOWLEDGE THAT I HAVE RECEIVED A COPY
OF THE UNITED STATES DISTRICT COURT FIRST AMENDMENT
JUDGEMENT.

SIGNATURE: Darryl Hardy

DATE: 8/29/05

K2-21a

CPD-62.130 (REV. 1/03)

1051475

Attachment # 38

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CHICAGO POLICE DEPARTMENT
PERSONNEL DIVISION
PERSONNEL INVESTIGATIONS SECTION

AFFIDAVIT

I, Darryl L Hardy, as a candidate for the position of Probationary Police Officer with the Chicago Police Department, swear and affirm, under oath, that I have not engaged in any criminal conduct or been convicted of any violation, other than traffic tickets, in any state or jurisdiction in the United States.

I am voluntarily making this sworn statement, in order to induce the Chicago Police Department to process my application at this time. I understand that if my fingerprint checks are eventually returned indicating that I have been convicted of any violation or engaged in criminal conduct, this affidavit shall serve as my written resignation, regardless of whether or not the offenses complained of would have disqualified me as a candidate.

I understand that I do not have to make this sworn statement, and that my application will be fully considered, and my qualifications fully assessed, if I do not do so.

Darryl L Hardy KZ-22
Candidate's Signature

[REDACTED]

Social Security Number

Subscribed and Sworn to
before me this 13th day
of AUGUST 2005.

J. T. [Signature]
Deputy Clerk of the Court

1051475

Attala 11478
Page 6 of 21

These obligations and restrictions are set forth in detail in the Governmental Ethics Ordinance (Chapter 2-156 of the Municipal Code) and in the Personnel Rules of the City. This Notice is intended to describe some of the more common situations covered by the City's ethics rules; it is not a substitute for a review of Chapter 2-156 or of the Personnel Rules. For authoritative guidance on specific questions relating to the Ethics Ordinance, consultation with the Board is recommended. The Board will maintain the confidentiality requirements of the Ordinance. For assistance, call (312) 744-9660.

ACKNOWLEDGMENT BY EMPLOYEE

I hereby acknowledge:

1. that I received a copy of the foregoing "NOTICE TO CITY EMPLOYEES OF CITY ETHICS RULES "; and
2. that I understand that I can view and download the complete text of the City's Governmental Ethics Ordinance by accessing the website of the Board of Ethics at www.cityofchicago.org/Ethics/ .

Signature: Darryl Hardy

Name: Darryl Hardy

Date: 8/29/05

FC2-2³
A

9-04

Revised for Amendments of June 23, 2004

CL# 1051475

Page 2 of 2

Attachment# 78

Page 7 of 21

RULES AND REGULATIONS AFFIDAVIT
Personnel Division
Chicago Police Department

TO: COMMANDER OF POLICE PERSONNEL
FROM: NAME: Darryl Hardy
TITLE: DPS
SOCIAL SECURITY NO: [REDACTED]
SUBJECT: RECEIPT OF CHICAGO POLICE DEPARTMENT'S
RULES AND REGULATIONS

I HEREBY ACKNOWLEDGE THAT I HAVE RECEIVED A COPY
OF THE CHICAGO POLICE DEPARTMENT'S RULES AND
REGULATIONS.

SIGNATURE: Darryl Hardy
DATE: 29 Aug 05 KL-24
X

CPD-62.109 (7/05)

CL# 1051475
Attachment# 78
Page 8 of 21



Richard M. Daley
Mayor

Department of Police • City of Chicago
3510 S. Michigan Avenue • Chicago, Illinois 60653

Philip J. Cline
Superintendent of Police

SPECIAL ATTENTION AND NOTIFICATION
**TO ALL CANDIDATES FOR THE POSITION OF PROBATIONARY POLICE
OFFICER FOR THE CITY OF CHICAGO**

After successful completion of a Police Officer's Examintation, candidates must complete a Personal History Questionnaire and other forms answering all questions **ACCURATELY AND TRUTHFULLY.**

Candidates who qualify for further processing and possible employment are required to provide all information necessary for a complete background investigation.

In accordance with Municipal Code of Chicago 2-74-095, ANY FALSIFICATION OR OMISSION OF INFORMATION may subject a candidate to DISQUALIFICATION and/or TERMINATION for employment and a FINE of up TO \$500.00.

Candidates for the position of Probationary Police Officer may be required to take a Polygraph Examination (**LIE DETECTOR TEST**).

If a candidate REFUSES to take or FAILS the Polygraph Examination the candidate will be REMOVED from the eligibility list.

**CANDIDATES ARE REMINDED THAT DISQUALIFICATION OF AN APPLICANT
AT ANY POINT IN THE SELECTION PROCESS WILL RESULT IN REMOVAL
FROM FURTHER CONSIDERATION.**

Signature: Darryl Hard

Print Name: DARRYL HARD 31473
n2-25

Attachment# 58



CHICAGO POLICE DEPARTMENT
PERSONNEL DIVISION
PERSONNEL INVESTIGATIONS SECTION

AFFIDAVIT

I, Darryl Hardy, as a candidate for the position of Probationary Police Officer with the Chicago Police Department, swear and affirm, under oath, that I have not engaged in any criminal conduct or been convicted of any violation, other than traffic tickets, in any state or jurisdiction in the United States.

I am voluntarily making this sworn statement, in order to induce the Chicago Police Department to process my application at this time. I understand that if my fingerprint checks are eventually returned indicating that I have been convicted of any violation or engaged in criminal conduct, this affidavit shall serve as my written resignation, regardless of whether or not the offenses complained of would have disqualified me as a candidate.

I understand that I do not have to make this sworn statement, and that my application will be fully considered, and my qualifications fully assessed, if I do not do so.

Darryl Hardy K2-26
Candidate's Signature

Subscribed and sworn to
before me this 30th day
of OCTOBER 2004.

Sgt John Fumo
Deputy Clerk of the Court

CL# 1051475

Attach. cont# 78

Page 10 of 21

I hereby certify that there are no willful misrepresentations, omissions or falsifications in this questionnaire, and all my answers are true and correct.

SIGNATURE (APPLICANT)

Darryl L Hardy

DATE (DAY - MONTH - YEAR)

02/11/04

CONTINUE ON TO PAGE 11 AND 12 TO SIGN RELEASE.

THIS SECTION TO BE COMPLETED AT THE TIME OF YOUR PERSONAL INTERVIEW WITH
AN INVESTIGATOR FROM THE CHICAGO POLICE DEPARTMENT

I have reviewed this questionnaire on this date in the presence of the below listed witness and re-affirm my position that all of the information provided by me in this questionnaire remains true and correct or, where applicable, I have made the necessary corrections and changes.

PRINT NAME (APPLICANT)

Darryl Hardy

DATE (DAY - MONTH - YEAR)

3-2-05

SIGNATURE (APPLICANT)

Darryl Hardy

DATE (DAY - MONTH - YEAR)

3-2-05

SIGNATURE (WITNESS)

A. Doherty

STAR #

#20918

DATE (DAY - MONTH - YEAR)

4 Feb 05

102-27

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City of Chicago
Employee Change of Address Form

Department CHICAGO POLICE Bureau PATROL *Reg 47-05*

Name DARRYL L HARDY

Position title P.P.O.

Social Security number [REDACTED]

I understand and acknowledge that as a condition of employment with the City of Chicago I must be an actual resident of the City of Chicago.

Old Address [REDACTED] Zip Code [REDACTED]

New Address [REDACTED] Zip Code [REDACTED]

Effective Date 08 APR 06

New Phone Number [REDACTED]

I understand that the falsification of this statement of address shall constitute grounds for discharge from the City Service.

I understand and acknowledge that I must report any change of address immediately to my department head and to the Department of Personnel and that failure to provide such notification shall constitute grounds for discharge from the City Service.

By signing this residency affidavit, I acknowledge and represent that I have fully read and understand **both the front and reverse sides** of this residency affidavit, and further certify that the information which I have provided herein is true and correct.

PERSONNEL SERVICES M/L
APR 12 2006

CHICAGO POLICE DEPARTMENT

Signed

Darryl Hardy

Date 10 APR 06

ER-282

CL# 1051475

Attachment# 38

Page 12 of 21

Complete and sign two copies.
First copy to departmental file.
Second copy to Department of Personnel.

(see reverse side)

CPD 0028061



City of Chicago
Employee Residency Affidavit

Department POLICE DEPARTMENT Bureau _____

Name DARRYL L HARDY

Position title Probationary Police Officer

Social Security number [REDACTED]

I understand and acknowledge that as a condition of employment with the City of Chicago I must be an actual resident of the City of Chicago.

My address is: [REDACTED]

Chicago, Illinois zip code [REDACTED]

I understand that the falsification of this statement of address shall constitute grounds for discharge from the City Service.

I understand and acknowledge that I must report any change of address immediately to my department head and to the Department of Personnel and that failure to provide such notification shall constitute grounds for discharge from the City Service.

By signing this residency affidavit, I acknowledge and represent that I have fully read and understand both the front and reverse sides of this residency affidavit, and further certify that the information which I have provided herein is true and correct.

Signed Darryl L Hardy

Date 8/29/05 CL# 1051475 RL-29

CL# 1051475

Attachment # 38

Page 13 of 21

Complete and sign two copies.

First copy to department file.

Second copy to Department of Personnel.



05

**City of Chicago
Employee Change of Address Form**

Department CHICAGO POLICE

Bureau PATROL

Name DARREL L HARDY

Position title POLICE OFFICER

Social Security number [REDACTED]

I understand and acknowledge that as a condition of employment with the City of Chicago I must be an actual resident of the City of Chicago.

Old Address [REDACTED]

Zip Code [REDACTED]

New Address [REDACTED]

Zip Code [REDACTED]

Effective Date 05 SEP 08

006 Dist

New Phone Number [REDACTED]

I understand that the falsification of this statement of address shall constitute grounds for discharge from the City Service.

I understand and acknowledge that I must report any change of address immediately to my department head and to the Department of Personnel and that failure to provide such notification shall constitute grounds for discharge from the City Service.

By signing this residency affidavit, I acknowledge and represent that I have fully read and understand **both the front and reverse sides** of this residency affidavit, and further certify that the information which I have provided herein is true and correct.

Signed

Darrel Hardy

Date

29 SEP 08

KL-30

CL# 1051475

Complete and sign two copies.
First copy to departmental file.
Second copy to Department of Personnel.

(see reverse side)

Attachment # 78
Page 4 of 21
PER 72 (Rev. 1/84)



DEPARTMENT OF POLICE * CITY OF CHICAGO
3510 SOUTH MICHIGAN AVENUE *CHICAGO, ILLINOIS 60653

SWORN
ELECTRONIC SIGNATURE VERIFICATION AFFIDAVIT

TO: COMMANDER, PERSONNEL DIVISION

FROM: NAME: HARDY, DARRYL

RANK/TITLE: Police Officer

PC NUMBER: [REDACTED]

EMPLOYEE NUMBER: [REDACTED]

SUBJECT: VERIFICATION OF SECURE ELECTRONIC SIGNATURE

I HEREBY ACKNOWLEDGE THAT THE CHICAGO POLICE DEPARTMENT HAS ASSIGNED TO ME A UNIQUE COMPUTER SYSTEM IDENTIFIER, KNOWN AS A "PC LOG-IN IDENTIFIER." I ACKNOWLEDGE THAT IT IS MY DUTY TO RETAIN CONTROL OF AND MAINTAIN THE SECRECY OF THE PASSWORD WHICH I HAVE CREATED FOR USE IN CONNECTION WITH MY PC LOG-IN IDENTIFIER. I FURTHER ACKNOWLEDGE THAT MY PC LOG-IN IDENTIFIER, AS VERIFIED BY MY PASSWORD, SHALL ACT AS MY ELECTRONIC SIGNATURE AND SHALL HAVE THE FULL LAWFUL EFFECT AS THAT OF MY WRITTEN SIGNATURE.

SIGNATURE: Darryl Hardy
DATE: 18 MAR 09

WITNESS' SIGNATURE: J. A. Block

DATE: 18 Mar 09

CPD-62.111 (Rev. 1/07)

11-71

CL# 1051475

Attachment # 38

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DEPARTMENT OF POLICE * CITY OF CHICAGO
3510 SOUTH MICHIGAN AVENUE * CHICAGO, ILLINOIS 60653

**SWORN
ELECTRONIC SIGNATURE VERIFICATION AFFIDAVIT**

TO: COMMANDER PERSONNEL DIVISION

FROM: NAME: DADDY HARDY

RANK/TITLE: ✓

PC NUMBER: [REDACTED]

EMPLOYEE NUMBER: [REDACTED]

SUBJECT: VERIFICATION OF SECURE ELECTRONIC SIGNATURE

I HEREBY ACKNOWLEDGE THAT THE CHICAGO POLICE DEPARTMENT HAS ASSIGNED TO ME A UNIQUE COMPUTER SYSTEM IDENTIFIER, KNOWN AS A "PC LOG-IN IDENTIFIER." I ACKNOWLEDGE THAT IT IS MY DUTY TO RETAIN CONTROL OF AND MAINTAIN THE SECRECY OF THE PASSWORD WHICH I HAVE CREATED FOR USE IN CONNECTION WITH MY PC LOG-IN IDENTIFIER. I FURTHER ACKNOWLEDGE THAT MY PC LOG-IN IDENTIFIER, AS VERIFIED BY MY PASSWORD, SHALL ACT AS MY ELECTRONIC SIGNATURE AND SHALL HAVE THE FULL LAWFUL EFFECT AS THAT OF MY WRITTEN SIGNATURE.

SIGNATURE: Danny Hardy
DATE: 26 MAR 07

WITNESS' SIGNATURE: Sgt. Sean H. C.

DATE: 26 MAR 07

CPD-62.111 (Rev. 1/07)

K2-32 X

CL# 1051475

Attachment# 78

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STATE OF ILLINOIS
County Of Cook
CITY OF CHICAGO

Star No. 16834

I, DARRYL C HARDY
Name (print)

having been appointed to the

office of POLICE OFFICER

do solemnly swear that I will support the Constitution of the United States, and the Constitution of the State of Illinois, and that I will faithfully discharge the duties of the office of such, according to the best of my ability.

Darryl Hardy

Signature

[REDACTED]
Address (print)

FEB 16th 2006

Date

K2-33

Witnessed by:

Cplh. B Woods

CPD 62.153 (Rev.3/95)

CL# 1051475

Attch # 38

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**PERSONAL HISTORY QUESTIONNAIRE
BACKGROUND INVESTIGATION
CHICAGO POLICE DEPARTMENT**

<p>PERSONAL HISTORY QUESTIONNAIRE BACKGROUND INVESTIGATION CHICAGO POLICE DEPARTMENT</p>		<p>1. POSITION APPLIED FOR: EXAM</p> <p><input checked="" type="checkbox"/> POLICE OFFICER</p> <p><input type="checkbox"/> OTHER (SPECIFY) _____</p>	<p>2. DATE OF BIRTH (DAY-MONTH-YEAR)</p> <p>_____</p>
<p>3. NAME (LAST - FIRST- MIDDLE INITIAL)</p> <p>HARDY DARRYL L</p>	<p>4. MAIDEN NAME (IF APPL.)</p> <p>N/A</p>	<p>5. HOME PHONE NO.</p> <p>_____</p>	<p>6. BUSINESS PHONE NO.</p> <p>_____</p>
<p>9. HOME ADDRESS (STREET NUMBER & NAME - APARTMENT NUMBER - CITY & STATE - ZIP CODE - COUNTY)</p> <p>_____</p>		<p>7. PAGER PHONE NO. () N/A</p>	<p>8. CELL PHONE NO.</p> <p>_____</p>
			<p>10. SOCIAL SECURITY NO.</p> <p>_____</p>

INSTRUCTIONS
PRINT OR TYPE ALL INFORMATION

**IT IS IMPORTANT TO READ THESE INSTRUCTIONS CAREFULLY AND TO SIGN
THE AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION
CONTAINED ON THE LAST PAGE OF THIS QUESTIONNAIRE**

You must be complete and truthful in all your answers. All answers that you give in this application are subject to verification. Any failure to report completely or any untruthful answers will subject you to rejection as a candidate. You are not required to disclose your HIV status in response to any question herein.

In this questionnaire, a number of items ask for simple "yes" and "no" answers and do not require any explanation. However, if you wish to explain your answers, use the **CONTINUATION SECTION** on page 9 of this questionnaire. Before each answer or explanation, write the item number for reference.

Do not leave any question blank. If a question does not apply to you, write "NA" (Abbreviation for "Not Applicable"). Your answers must be legible. Do not disclose any medical or psychological conditions in response to any question herein.

DISCLAIMER

I understand that the processing of this Personal History Questionnaire is not a guarantee of employment or hire as a Probationary Police Officer or the position applied for. I further understand that consideration for employment is dependent upon my successful completion of all steps of the process for this position and upon the availability of a budgeted position for Probationary Police Officer or the position applied for.

I have read and understand all of the instructions pertaining to this Personal History Questionnaire and the content of the above disclaimer.

11. SIGNATURE (APPLICANT)	12. DATE (DAY - MONTH - YEAR)
<i>Darryl L. Hardy</i>	102/11/04

- any and all records maintained by any criminal justice or corrections agency including incident reports, arrest records, traffic citations and criminal history information
- any information contained in investigatory files

I hereby release you, as the custodian of such records, your organization, including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family, or associates because of compliance with this authorization to release information or any attempt to comply with it. I direct you to release such information upon request of the duly authorized representative of the CPD regardless of any agreement I may have previously made to the contrary. For and in consideration of the CPD acceptance and processing of my employment application, I agree to hold the organization, its agents and employees harmless from any and all claims and liability associated with my employment application or in any way connected with the decision whether or not to employ me with the CPD, including any liability or damage pursuant to any state or federal laws.

I understand that should information of a serious criminal nature surface as a result of this investigation, such information may be turned over to the proper authorities. I understand my rights under Title 5, United States Code, Section 552a, the Privacy Act of 1974, with regard to access of and to disclosure of records, and I waive those rights with the understanding that information furnished will be used by the CPD in conjunction with employment procedures.

I also understand that by signing this release, I specifically waive any written notice to me of the disclosure of any disciplinary report, letter of reprimand, or other disciplinary action as required by the Illinois Personnel Record Review Act - 820 ILCS 40/7.

A photocopy/FAX copy of this release will be valid as an original thereof, even though said photocopy/FAX copy does not contain an original writing of my signature. Should there be any questions as to the validity of this release, you may contact me at the address listed below.

I further understand that I waive any right or opportunity to read or review any and all information provided in the background investigation report prepared by the CPD or its attachments and that all information and documents provided to the CPD become the property of the CPD and will not be returned to me.

I agree to indemnify and hold harmless the person to whom this request is presented and his agents/employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees, arising out of or reason of complying, or any attempt to comply with this request.

By signing below, I certify that I have had adequate time to review this entire form and have read and clearly understand its purpose.

Signature:

Danay O'Hanley

Date:

02/11/04

Address:

[REDACTED]

Phone:

[REDACTED]

Date of Birth:

[REDACTED]

Social Security No.

[REDACTED]

Witness:

Kyle Miller

Date:

02/11/04

CITY 1051 AND E2-352

PAGE 12

Attachment # 78

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CHICAGO POLICE DEPARTMENT
EVIDENCE

RD. NO. _____ DATE 05 AUG 2013

INVENTORY NO. [REDACTED] ME NO. _____

TYPE OF OFFENSE _____

CASE NAME CR 1051475

ADDRESS OF SCENE/SERVICE _____

District of Occurrence _____ Beat No. _____

Detective(s) KENNEY Area B. I. A.

Sgt. C. Blawie P.D.

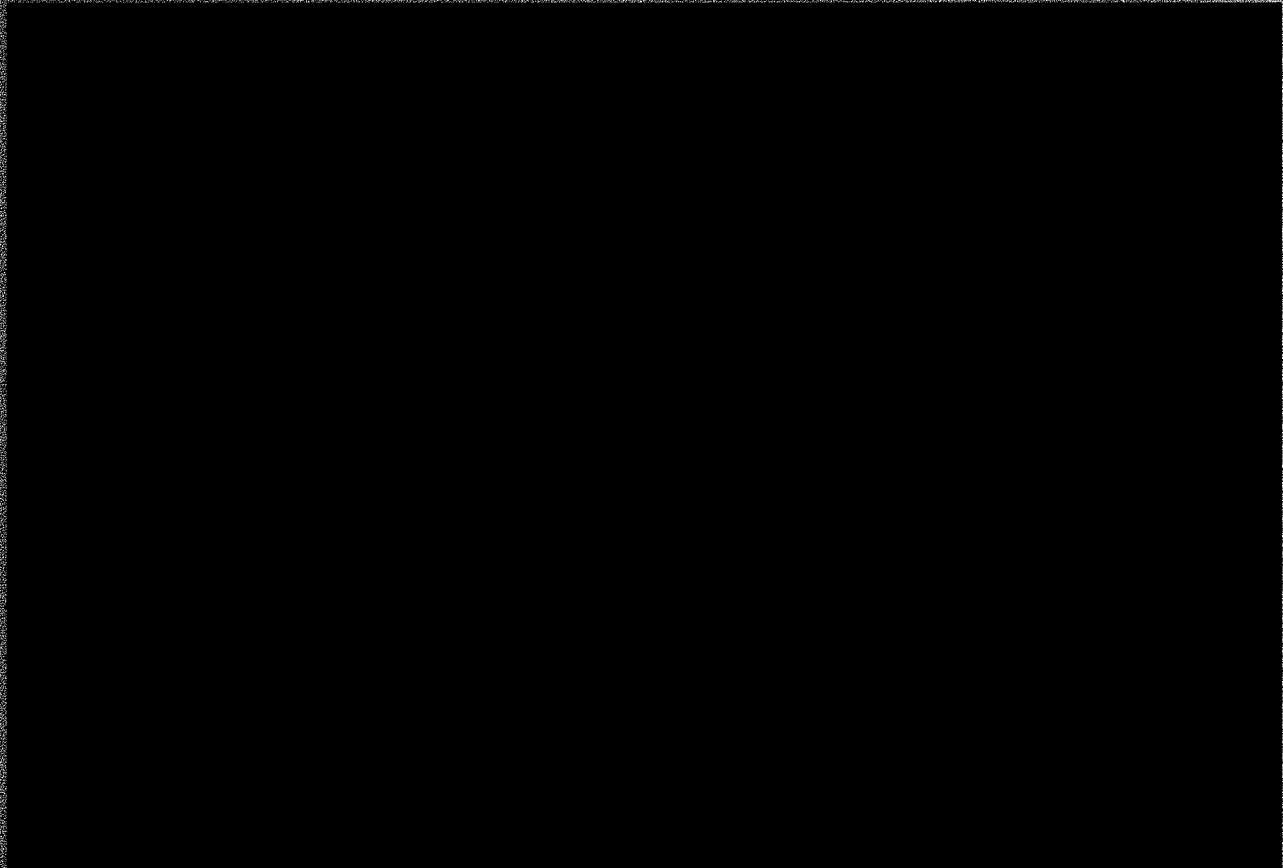
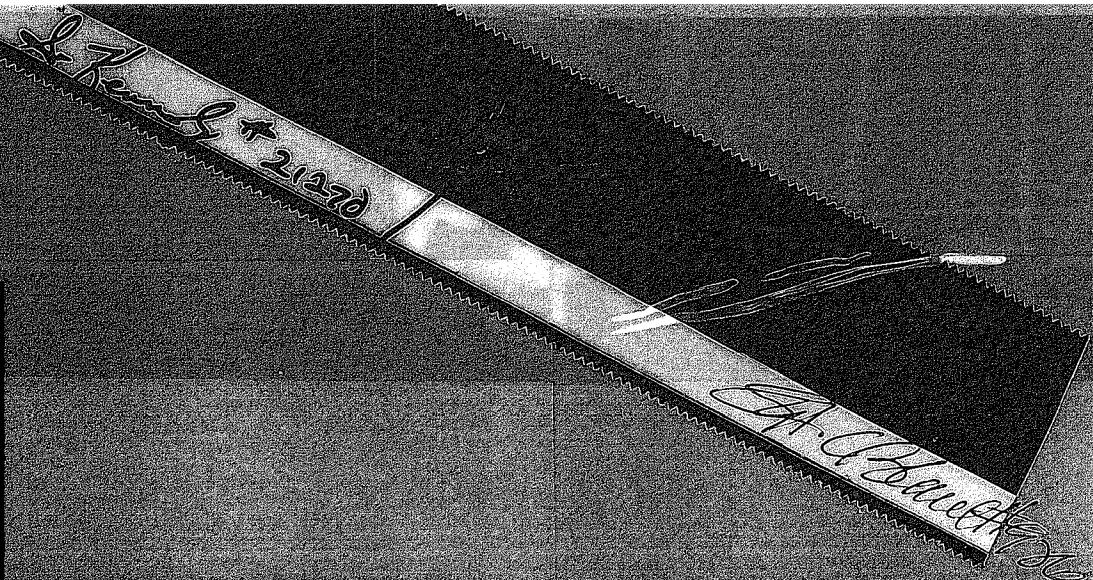
CONTENTS

HANDWRITING SAMPLES

RECOVERED FROM PO DARRYL HARDY

RECOVERED BY DET. SHAWN KENNEY

CPD 33.310 - A (3/97)



F R A N K I N G